

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
A.P.E. CLASSIFIER			
F RMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 - Allowed
 (Through numeral) Canceled
 + Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
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Best Available Copy

If more than 150 claims or 10 actions
 staple additional sheet here

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